



QR Tips

AQIS AOABH Support Team

2/1/2019

[Edition 1, Volume 20]

Health Care Agency, Behavioral Health Services, AQIS AOABH Support

Chart Documentation Requirement Scope of Practice Requirements

The following excerpt from the California Department of Health Care Services (DHCS) MHSUDS Information Notice No.: 17-040 provides guidance and addresses frequently asked questions regarding scope of practice requirements:

1. Who can direct and/or provide Specialty Mental Health Services (SMHS)?

The following mental health professionals may provide and direct others in providing SMHS, within their respective scope of practice:

- Physicians
- Psychologists
- Licensed Clinical Social Workers
- Licensed Professional Clinical Counselors
- Licensed Marriage and Family Therapists
- Registered Nurses
- Certified Nurse Specialists; and,
- Nurse Practitioners

Waivered/registered mental health professionals may only direct (and/or provide) services under the supervision of a Licensed Mental Health Professional (LMHP) in accordance with applicable laws and regulations governing the registration or waiver (Cal. Code Regs., tit. 9 §1840.314(e)(1)(F)).

2. Can a non-LMHP complete parts of the assessment?

The diagnosis, MSE, medication history, and assessment of relevant conditions and psychosocial factors affecting the beneficiary's physical and mental health must be completed by a provider, operating in his/her scope of practice under California State law, who is licensed, waived, and/or under the direction of a LMHP.

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However, the MHP may designate certain other qualified providers to contribute to the assessment, including gathering the beneficiary's mental health and medical history, substance exposure and use, and identifying strengths, risks, and barriers to achieving goals (Cal. Code Regs., tit. 9 §1840.344; State Plan, Section 3, Supplement 3 to Attachment 3.1-A, pg. 2m-p)

Final Rule

Clinical Supervision Requirements

This Final Rule requirement has been in effect since September 17, 2018. It is crucial to keep AQIS informed of the initiation AND termination of clinical supervision by submitting the required documents in a timely manner.

Information and relevant materials regarding this requirement, including the BHS-AQIS A Guide to Clinical Supervision, have been provided to Service Chiefs and Supervisors via e-mail. They can also be found on our website for your reference:

[AQIS AOABH Support Team Website](#)

Medi-Cal Documentation Reminders

14-Day Different Day Documentation Rule

- Progress notes must have the date when the service was provided, and when the documentation was completed. Even if the documentation was completed on the same date of service, this must be clear in the note.
- All County and Contract programs are expected to follow the 14-day Different Day Documentation rule. The date of service is always counted as day 1, and anything written beyond 14 days from that date is considered a non-compliant service, and should be entered using a non-compliant CPT code. For certain programs (i.e., CSU) there may be different documentation timelines. Please check with your Service Chief or Program Director for specific program requirements and timelines.

Assessment

- Initial assessments must be completed as soon as the relevant information to establish a diagnosis and Care Plan is obtained.

- Assessment progress notes are subject to medical necessity requirements from the first session. This means that progress notes should document a Medi-Cal included diagnosis and all of the activities performed to evaluate the client's mental health.
- Assessment notes that repeat the same information that was collected during previous assessment sessions are considered overbilling and can be subject to recoupment during an audit.
- Assessment typically involves activities such as performing a Mental Status Examination, obtaining the client's clinical history, investigating relevant cultural issues and psychological testing.
- The information collected to establish the primary diagnosis clearly follows the criteria established in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5). Failure to do this may result in the claim recouped during an audit.
- Clinicians determine the corresponding included ICD-10 mental health diagnosis for billing

purposes. As a reminder, all applicable ICD-10 diagnoses are subject to change.

MHP Contract, Exhibit A, Attachment 3; Title 9 of the California Code of Regulations (CCR) §1830.205(b) (1) and 1830.210; and Mental Health and Substance Use Disorder Services Information Notices

Reminders

*Service Chiefs and Supervisors, the Provider Directory excel spreadsheets are due on the 3rd Monday of each month. Please be sure to respond to the most recent request sent via email by Amanda Hamm.

*Service Chiefs and Supervisors, please document the review of QRTips in staff meetings. Thank you!

Upcoming Trainings & Meetings

New Provider Training (Documentation & Care Plan Trainings)

Wednesday February 20th 8:30am – 4pm

Wednesday February 27th 8:30am – 4pm

*Please call 714.834.5601 to sign up.

Core Trainers Meetings

County Core Trainers Meeting

Thursday February 7th 10am – 11:30am Room 433

Contractor Core Trainers Meeting

Thursday February 14th 1:30pm – 3pm Room 433

HELPFUL LINKS

AQIS AOABH SUPPORT TEAM WEBSITE

[ORANGE COUNTY, CALIFORNIA - AUTHORITY & QUALITY IMPROVEMENT SERVICES](#)

AQIS DOWNLOADS

[ORANGE COUNTY, CALIFORNIA - DOWNLOADS](#)

2018 CODING MANUAL & CLINICIAN HANDBOOK
[CODING MANUAL & CLINICIAN HANDBOOK V10](#)

BHS ELECTRONIC HEALTH RECORD

[BHS ELECTRONIC HEALTH RECORD INFORMATION](#)

MEDI-CAL CERTIFICATION/RECERTIFICATION
[ORANGE COUNTY, CALIFORNIA - MEDI-CAL CERTIFICATION](#)

Please contact AQIS AOABH Support with any questions or comments. We look forward to helping you. Thank you!
